Combined Declaration For	ATTORNEY DOCKET 88851SLP											
As below named inventor, I	hereby declare that:					· · ·	_					
My residence, post office address and ci				•								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:												
subject matter which is claimed and for	which a patent is sought on the i	invention (	entitled:									
DENTAL RADIOLOGY APPARATUS AND SIGNAL PROCESSING METHOD USED												
THEREWITH												
The specification of which (check only o	one item below):							-				
is attached hereto.												
was filed as United States Application Serial No. on and												
was filed as United States Application Serial No. on and was amended on (if applicable).												
X was filed as PCT international		2004/012	2885 on 11-21-2003 and w	as amende	d on (if a	pplicable).						
I hereby state that I have reviewed and u	nderstand the contents of the ab	ove-ident	ified specification, including	the claims, as	s amended	l by any amen	dment ref	ferred to				
above.												
I acknowledge the duty to disclose to the	U.S. Patent & Trademark Office	ce all info	rmation known to me to be n	naterial to par	tentability	as defined in	Title 37,	Code of				
Federal Regulations, §1.56.		1 6110	( ) + 1) 2(5 (1) - 6 6-	liaas	rian(a) fan	-otant or inv	mtorio co	+ificate				
I hereby claim foreign priority benefits or (365 (a) of any PCT international a			•									
identified below any foreign application	- '											
United States of America filed by me on												
PRIOR FOREIGN/PCT APPLICATION												
COUNTRY (I PCT, indicate PCT)	APPLICATION NUMBER		DATE OF FILING (month/dayyear)		P	PRIORITY CLAIMED UN	IDER 35 USC §	119				
EP	03292901.0		21 November 2	003	X	YES	,	NO				
PCT	EP2004/012885		13 November 2	004	X	YE\$		NO				
		· · · · · · · · · · · · · · · · · · ·				YES		NO				
				· · · · · · · · · · · · · · · · · · ·								
I hereby claim the benefit under Title 35	, United States Code, 119 §(e)	of any Un	ited States provisional applic	ation(s) listex	d below:							
PRIOR PROVISIONAL APPLICATION	ON(S) AND ANY PRIORITY	CLAIMS	UNDER 35 U.S.C. §119 (	e):			<del></del> -					
PROVISIONAL APPLICA	TION NUMBER			FILING DATE (mo	onth/day/year)							
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		-		•	· · · · · · · · · · · · · · · · · · ·	•		·				
I hereby claim the benefit under Title	35, United States Code, §120	of any pri	or United States application	(s) or PCT in	nternation	al application	(s) design	nating the				
United States of America that is/are lisapplications(s) in the manner provided	sted below and, insofar as the by the first paragraph of Title	subject m 35, §113	eatter of each of the claims 2. I acknowledge the duty to	of this appli o disclose to	cation is in the U.S.	not disclosed Patent & Tra	in inavir idemark (	Office all				
information known to me to be material	to patentability as defined in Ti	itle 37, Co	de of Federal Regulations §	1.56, which b	ecame ava	ailable betwee	n the fili	ng date of				
the prior application(s) and the national	or PC1 international filing date	or unis app	oncation:	<u> </u>		·		<del></del>				
PRIOR US APPLICATIONS OR PC	r international applic	CATIONS	DESIGNATING THE U.S	FOR BENE	FIT UND	ER 35USC§	120:					
	U.S. APPLICATIONS			1	STA	TUS (Check on	ie)					
U.S. APPLICATION NUMBER		U.S. FIL	ING DATE	PATENT	ED	PENDING	ABAI	NDONED				
EP2004/012885	1;	13 November 2004				Inactive						
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PCT APPLICATION NO.	PCT FILING DATE	G DATE  U.S. SERIAL NUMBERS ASSIGNED (if any)										
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Combined Declaration For Patent Application and Power of Attorney (Continued)					ATTORNEY DOCKET	<b>P</b>				
POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or										
agent(s) associated with Eastman Kodak Company <u>Customer No. 01333</u> to prosecute this										
application and transact all business in the Patent and Trademark Office connected therewith.										
Send Correspondence to:					Direct Telephone Calls to: (name and telephone number)					
Patent Legal Sta			~		(name and telephone number)					
				Company	Susan L. Parulski					
343 State Street					585-477-4027					
Rochester, NY			r, NY 1	4650-2201	FAX: 585-477-4646					
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN NAME					
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		4 rue F. Pelloutier Croissy-		•						
	FULL NAME OF	Beaubourg FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN NAME	SECOND GIVEN NAME				
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		Beaubourg								
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4 rue F. Pelloutier Croissy-										
Н	Beaubourg		FIRST GIVEN NAME	SECOND GIVEN NAME						
2	FULL NAME OF INVENTOR	FAMILY NAME								
0	RESIDENCE & CITIZENSHIP	CITY	•	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP					
	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP CODE (COUNTRY)	STATE & ZIP CODE (COUNTRY)				
	FULL NAME OF	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN NAME.					
2	INVENTOR	7 Addit 1 Addit								
0	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP					
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	FULL NAME OF	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN NAME					
2	ROTRISVAL									
0	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP					
6	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP CODE (COUNTRY)					
I b	oroby, doologo t	hat all statements made herein of my a	ouen knowl	adas are true and that all statements made a	an information and halief are halieved to be true:					
	_			<del></del>	on information and belief are believed to be true; are punishable by fine or imprisonment, or both, un					
		·	hat such wi	illful false statements may jeopardize the val	idity of the application or any patent issued thereon	i=				
SIGNATURE OF INVENTOR 201 SIGNATUR		SIGNATURE	OF INVENTOR 202	SIGNATURE OF INVENTOR 203						
DATE		DATE		DATE						
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SIGNATURE OF INVENTOR 204 SIGNATU		SIGNATURE	OF INVENTOR 205	NATURE OF INVENTOR 206						
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